

Chairman of the Board
Robert L. Carson, Esq.

President
Robert H. Eckel, MD, FAHA

Chairman-Elect
Andrew B. Buroker, Esq.

President-Elect
Raymond J. Gibbons, MD, FAHA

**Immediate Past
Chairman of the Board**
William D. Colledge

Immediate Past President
Alice K. Jacobs, MD, FAHA

Secretary-Treasurer
Gary L. Ellis

Directors
Kenneth M. Baker, MD, FAHA
Vincent Bufalino, MD, FAHA
Ronald L. Copeland, MD
Ray Durazo
Michael Frankel, MD
Hallie Hackenberger
Daniel W. Jones, MD, FAHA
David Josserand
Ronald M. Krauss, MD, FAHA
Neil M. Meltzer, MPH
Jennifer Mieres, MD
Marlin Miller, Jr.
John Moultrie
Karen Murray
Hon. John Edward Porter, Esq.
James J. Postl
Ralph L. Sacco, MD, FAHA
Janet Spradlin, MSW, PhD
Gail R. Wilensky, PhD

Chief Executive Officer
M. Cass Wheeler

**Chief Operating Officer
National Center**
Nancy A. Brown

**Chief Operating Officer
Field Operations**
Gordon L. McCullough

Chief Science Officer
Rose Marie Robertson, MD, FAHA

**Executive Vice President
Corporate Operations & CFO**
Walter D. Bristol Jr, CPA

**Executive Vice President
Healthcare Markets**
Meighan Girgus

**Executive Vice President
Advocacy**
TBD

**Executive Vice President
Communications**
Robyn Lee Landry, APR

**Executive Vice President
Corporate Secretary &
General Counsel**
David Wm. Livingston, Esq.

**Executive Vice President
Development**
Suzie Upton

**Executive Vice President
Technology & Customer
Strategies**
Michael Wilson

Heart Disease and Stroke. You're the Cure.



**American Stroke
Association**
A Division of American
Heart Association

October 17, 2005

VIA EMAIL

Jo Anne Barnhart
Commissioner
Social Security Administration
100 Altmeyer Building
6401 Security Boulevard
Baltimore, Maryland 21235-6401

**Re: The American Heart Association's Comments on the Proposed
Rule Revising the Medical Criteria for Evaluating Visual Disorders
(RIN 0960-AF34).**

Commissioner Barnhart:

On behalf of the American Heart Association (AHA), including the American Stroke Association (ASA) and over 22.5 million AHA and ASA volunteers and supporters, we submit the following comments in response to the Social Security Administration's (SSA) Federal Register (FR) entitled *Proposed Rule: Revised Medical Criteria for Evaluating Visual Disorders*.¹

Since 1924, the American Heart Association has dedicated itself to reducing disability and death from cardiovascular disease and stroke — the #1 and #3 leading causes of death in the United States — through research, education, community-based programs and advocacy. The American Heart Association's efforts include the development of evidence-based clinical practice guidelines designed to advise physicians and other providers on the prevention, treatment and chronic management of cardiovascular disease and stroke.²

¹ 70 Fed. Reg. at 48342 (August 17, 2005).

² To see a complete listing of AHA guidelines, including joint ACC/AHA guidelines go to: <http://www.americanheart.org/presenter.jhtml?identifier=3004546>

After reviewing the proposed revisions, we limit our comments to proposed section 2.00A4b and section 102.00A4b. In the proposed rule, the SSA states that it intends to provide more detailed guidance on the statutory definition of blindness. In proposed section 2.00A4b, the agency proposed to include the following language, “A diagnosis of cortical blindness (blindness due to a brain lesion) must be confirmed by documentation of the catastrophic event, such as a **cardiac arrest or stroke**, that caused the brain lesion.”³

The American Heart Association commends the Social Security Administration for including the proposed section. We believe that section 2.00A4b will help to ensure that Americans who have cortical blindness due to cardiac arrest or a stroke will be properly identified as disabled. We urge that the agency include this proposed language in section 2.00A4b in the final rule.

In section 102.00A4b, pertaining to children, the SSA proposes to include the following language, “A diagnosis of cortical blindness (blindness due to a brain lesion) must be confirmed by documentation of the catastrophic event, such as a **cardiac arrest or near drowning**, that caused the brain lesion.”⁴ The difference between proposed sections 102.00A4b and 2.00A4b is that, for children, the SSA is proposing to include “near drowning” as an example of a catastrophic cause of cortical blindness, while excluding stroke. The agency’s rationale in excluding stroke in proposed section 102.00A4b is that stroke is not likely to occur in children.

While section 102.00A4b is intended to provide more detailed guidance, the AHA/ASA are concerned by the agency’s decision to exclude stroke as an example of a “catastrophic event” for children. The greater Cincinnati/North Kentucky Stroke study found the stroke rate was 2.7 per 100,000 for children ages 1-14. Additionally, 1 out of 10 children with ischemic strokes have a recurrence within 5 years.⁵ Minority populations are at particularly increased risk.

We are concerned that by failing to include stroke as an example of a “catastrophic event” some adjudicators may deny a child’s claim for disability for a visual disorder that was caused by a stroke. In some instances, an adjudicator may be more likely to interpret the examples in proposed 102.00A4b as an all-inclusive list despite the insertion of language “**such as cardiac arrest or near drowning**” in this section.

Moreover, the proposed language fails to recognize that stroke is the basis of cortical blindness in both heart attacks and near drowning. Cortical blindness that occurs after a heart attack is due to a stroke in the visual regions due to reduced blood flow related to the heart attack (mixed hypoxic-hypotensive ischemia) and cortical blindness that occurs after a near drowning is due to a stroke in the visual regions due to reduced oxygenation related to

³ 70 Fed. Reg. at 48349.

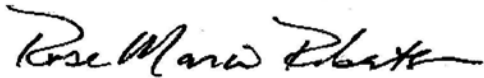
⁴ 70 Fed. Reg. at 48349.

⁵ Neurology 2003; 61[2]:116-23.

the near drowning (pure hypoxemic ischemia). Therefore, we would strongly urge the SSA to include stroke in addition to heart attack and near drowning in section 102.00A4b of the final rule.

For the foregoing reasons, the American Heart Association encourages that the final rule include the language, as drafted, for section 2.00A4b. We would also urge the SSA to include stroke as an example of a catastrophic event that may lead to statutory blindness in children. Should you have any questions or require any additional information, please do not hesitate to contact Penelope Solis, J.D., Regulatory Relations Manager at (202) 785-7905 or via email at penelope.solis@heart.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Rose Marie Robertson". The signature is fluid and cursive, with the first name "Rose" being the most prominent.

Rose Marie Robertson, MD, FAHA
Chief Science Officer
American Heart Association